CLINTON ADMINISTRATION EFFORTS TO SUPPORT THE DEVELOPMENT OF AMERICA'S YOUNGEST CHILDREN

"Learning begins in the first days of life. Scientists are now discovering how young children develop emotionally and intellectually from their very first days, and how important it is for parents to begin immediately talking, singing, even reading to their infants....We already know we should start teaching children before they start school."

-- President Bill Clinton, State of the Union Address, February 4, 1997

Recent scientific research has demonstrated that experiences during the earliest years of life -- before children reach school age -- are critical to their cognitive, emotional, and physical development. Nurturing and stimulating children in the first years of life actually help their brains develop and prepare them for the challenges of school and later life. President Clinton is committed to giving America's children the opportunity to live up to their God-given potential by investing in research, supporting parents and caregivers, and strengthening programs that provide early intervention to disadvantaged families.

PROTECTING OUR CHILDREN'S HEALTH

Supported Over 90% of all Children's Research. In fiscal year 1995, the federal government spent an estimated $2 billion on research and development directly related to children and youth -- over 90% of all funding of children's research. Spending on children's health research at The National Institutes of Health (NIH) increased 25% between 1993 and 1997, and this year NIH will spend $904 million on research on young children alone. This research has contributed to the recent advances in understanding early learning and language development.

Increased participation in WIC program. WIC Supplemental Nutrition Program provides nutrition packages, nutrition education, and health referrals to low-income pregnant women, infants, and children. Over the past four years participation has expanded by 1.7 million from 5.7 to 7.4 million women, infants, and children. The increase in the President's budget proposal fulfills his commitment to achieving full participation in WIC by the end of 1998. Research shows that WIC prenatal services save Medicaid much more than they cost by reducing health care expenses in the first 60 days after birth.

Raised Childhood Immunization Rates to an All-Time High. The President's Childhood Immunization Initiative focuses on five areas: 1) improving the quality and quantity of vaccination delivery services; 2) reducing vaccine costs for parents; 3) increasing community participation, education and partnerships; 4) improving systems to monitor diseases and vaccinations; and 5) improving vaccines and vaccine use. This initiative has achieved notable

success. In 1995, 75% of two-year olds were fully immunized -- an historic high. Funding for childhood immunization has doubled since fiscal year 1993.

Protected the Medicaid Guarantee for 9 Million Children Under 6 Years Old. This Administration has protected and, preserved -- and now will improve on -- the guarantee of Medicaid coverage for 36 million Americans, including 9 million children under the age of 6. In 1995, the President vetoed the Republican Medicaid block grant proposal that would have ended the guarantee of coverage for up to 4 million children by 2002. At the same time, the President worked with states by granting 15 comprehensive Medicaid waivers and approving many more state plan amendments that improve and expand coverage for children.

Seeks to Extend Health Coverage to Up to 5 Million Children. Although this Administration has made great strides in protecting the health of America's neediest children, there is still much to be done. In 1995, more than 10 million American children, 80% of whom have working parents, had no health insurance. The President's budget takes three important steps to address the problem of children who lack health insurance coverage:

1) Provides annual grants to states to cover health insurance premiums for families of workers who are in-between jobs;
2) Utilizes state partnership grants to help working families who are not eligible for Medicaid to purchase private insurance for their children; and
3) Expands Medicaid coverage by allowing states to continue Medicaid coverage for up to one year even if family income changes, intensifying outreach to children who are currently eligible but not enrolled, and continuing current law expansions of coverage to reach poor children between the ages of 13 and 18.

Fighting Pediatric AIDS. In 1994, the National Institutes of Health released new research showing that the use of the drug AZT by HIV-infected pregnant women can reduce the risk of transmission from mother to child by two-thirds. In response, the Food and Drug Administration quickly approved changes in labeling indications for AZT to include HIV-infected pregnant women and, in 1995, the Centers for Disease Control began recommending routing HIV counseling and voluntary HIV testing for all pregnant women. In addition, the President has consistently supported investment through Title IV of the Ryan White CARE Act, which provides grants for coordinated HIV services and access to research for children, women and families. Since 1994, $113 million has been appropriated under Title IV, with 59 organizations in 26 states, Puerto Rico and the District of Columbia receiving support.

Protecting Mothers and Children. Due to the Clinton Administration's comprehensive strategy to increase access to prenatal care, the preliminary estimate for the U.S. infant mortality rate (the rate at which babies die before their first birthday) is at an historic low of less than 8 deaths per 1,000 live births in 1995, and the proportion of mothers getting early prenatal care is at a record high of 81%. In addition, the President spearheaded legislation requiring insurance companies to cover at least 48 hour hospital stays following childbirth. In 1970, the average length of stay for an uncomplicated delivery was four days, but by 1992 it had declined to two days. This legislation ensures that mothers and babies do not leave the hospital before they and their doctors decide they are ready. The Administration is ensuring that the health needs of mothers and

children are met by providing over $1 billion in FY 97 for Title V Maternal and Child Health Programs. The Maternal and Child Health Block Grant, one of the Title V programs, serves approximately 17 million women, infants and children, in partnership with states. In addition, Title V programs provide comprehensive care for children with special health needs, meet nutritional and development needs of mothers and children and help reduce infant mortality.

Preventing Sudden Infant Death Syndrome (SIDS). The Clinton Administration launched the Back to Sleep public education campaign to send the message to parents and health professionals that putting babies to sleep on their backs can reduce the risk of Sudden Infant Death Syndrome. Largely as a result of this campaign, SIDS deaths dropped by 30% between 1992 and 1995.

PROMOTING EARLY LEARNING

Increased participation in Head Start, created Early Head Start for 0-3 year olds, and improved program quality. For more than thirty years, Head Start has been one of our nation's best investments. President Clinton has made improving and expanding Head Start a priority because Head Start ensures that low-income children start school ready to learn. Over the past five years, funding for the program has increased by 80%, and in fiscal year 1997 Head Start will serve 800,000 low-income children five years old and younger. Initiated in 1994, there are now 143 *Early Head Start* programs across the country, expanding the proven benefits of Head Start to low-income families with children under three. Over the last three years, the Clinton Administration has also invested significantly in improving program quality and providing local programs with the resources they need to attract and retain high quality teachers. The President's 1998 budget proposal provides a $324 million increase in Head Start's budget so that it will remain on course to serve 1 million children by 2002.

Early HS
BR for 98
$215 M
57% of HS total
35,000 kids
97 $159 M ($56↑)
27,000 kids

Improved Support for Infants and Toddlers with Special Needs. Under the Individuals with Disabilities Education Act (IDEA), the Infants and Families Program supports the continuing efforts of states to implement high quality statewide early intervention services for infants and toddlers with disabilities. Over the past four years, funding for the program has increased by 48% or $102.5 million. During the same period, the number of children served increased by 21.5%. An estimated 191,000 children will be served in fiscal year 1998.

Enhanced Family Literacy Program. Even Start Family Literacy is a family-focused grant program to improve the educational opportunities for children and their parents in low-income areas by integrating family literacy activities, including early childhood education, adult education, and parenting education. Since 1993, funding for Even Start has increased by over 40% to support programs in every state and the District of Columbia.

Providing Funding for Parent Resource Centers in 42 States. In addition to involving parents in the development of state and local education plans, the President's Goals 2000 program provides funding to establish parent resource centers that help parents learn how to help their children meet high standards. The centers provide training, distribute resource materials, and support a variety of programs that strengthen family involvement in education. In fiscal year 1997, funding is available for support centers in 42 states, 14 more than in 1996.

Promoting Parents as First Teachers. The President's America Reads Challenge, a campaign to ensure that every child can read well by the end of the third grade, includes Parents as First Teachers Challenge Grants to fund proven local, regional and national programs that provide assistance to parents to help their children become successful readers. The grants can be used to expand successful programs such as the Home Instruction Program for Preschool Youngsters (HIPPY) and the Parents as First Teachers (PAT) program. They will also fund national and regional networks to share information on how parents can help children to read.

IMPROVING CHILD CARE

Increased Child Care Funding. Since 1993 federal funding for child care has increased by $1 billion, providing services for over 660,000 children -- 65% of whom are under 5 years of age. The newly established Child Care and Development Fund (CCDF) has made available $2.9 billion to states. The new fund, authorized and expanded by the new welfare law, will assist low-income families working their way off welfare to obtain child care so they can work or attend school.

Improved Child Care in Public Housing. The Early Childhood Development Program helps to provide quality child care for families living in public housing communities, as well as families who are homeless or at risk of becoming so. The program allows parents or guardians who live in public housing to get and keep jobs by ensuring that their children are cared for. In 1996, $21 million was awarded to public housing sites across the country -- three times more than in 1994.

Providing High Quality Child Care for Military Families. Under the Clinton Administration, the Department of Defense has made important strides to improve the quality of child care for the children of the men and women who serve our country. Since 1992, the number of military child care facilities that are accredited by the independent National Association for the Education of Young Children has risen from 55 to 466. Currently, 72% of military child care programs are accredited, as compared to only 7% of other child care facilities nationwide.

SAFEGUARDING THE ENVIRONMENT

Controlling Childhood Lead Poisoning. The Administration has launched a major new effort to control childhood lead poisoning. The program requires landlords and sellers of older homes to notify prospective tenants and buyers about lead-based paint hazards, provides grants to states to control lead-based paint hazards in low-income privately-owned homes, and offers technical assistance to ensure that lead hazard control work is done safely and efficiently. The 1997 interim report evaluating the HUD Lead-Based Point Hazard Control grant program shows that median dust levels on interior window sills were reduced by 85 %. In addition, the number of children suffering from lead poisoning dropped from 1.7 million in the late 1980s to about 930,000 in the mid-1990s.

Protecting Our Children's Environment. Because their bodies are still developing, children are among the most vulnerable to pollution in the air, water and soil. In 1995, the Clinton Administration began requiring that children receive first consideration when EPA assesses

environmental hazards and sets public health standards. In addition, the Clinton Administration has strengthened environmental protections for children by: proposing to strengthen air quality standards for soot and smog to protect children from air pollution, particularly those with asthma; speeding the clean-up of two-thirds of the nation's toxic waste sites to protect the 10 million children under age 12 who live within four miles of a toxic waste dump; strengthening drinking water protections to ensure that drinking water is free of microbial contaminants; expanding families' right to know about environmental health risks that infants and children face to help them make informed decisions about their children's exposure to these risks; issuing advisories about contaminated fish so parents can protect children from cancer-causing PCBs; and educating parents about the effects of second-hand smoke, which annually results in 7,500 to 15,000 hospitalizations of infants and children under 18 months of age.

STRENGTHENING FAMILIES

Passed Family and Medical Leave. The President fought for the passage of the Family and Medical Leave Act (FMLA) that allows workers to take up to 12 weeks unpaid leave to care for a newborn or adopted child, to attend to their own serious health needs, or to care for a seriously ill parent, child or spouse. In June 1996, President Clinton proposed expanding FMLA to allow workers to take up to 24 unpaid hours off each year for school and early childhood education activities, routine family medical care, and additional activities related to caring for an elderly relative. Last week, the President asked Federal agencies to implement his expanded leave policy immediately for Federal workers.

Improved Children's Television. The President announced a breakthrough agreement with the media and entertainment industry to develop a television ratings system to enable parents to protect their children from violence and adult content. In addition, the Administration has given parents greater control over what their children watch on television by requiring the installation of anti-violence screening chips ("V-chips") in all new televisions.

Reducing Child Abuse and Domestic Violence. The Administration created the Safe Streets/Safe Kids initiative to make community responses to child abuse and neglect more comprehensive and coordinated in an effort to break the cycle of early childhood victimization and later delinquency. The Administration also put in place a nurse home visitation program for low-income first-time mothers. Studies have shown that home visitation programs are successful -- for example, reducing cigarette smoking during pregnancy by 25% and reducing mistreatment of children from birth to age 2 by 80 percent. The Clinton Administration has also taken significant steps to reduce domestic violence. For example, the Rural Domestic Violence and Child Victimization Enforcement Grant Program helps law enforcement agencies, courts community organizations and businesses to work toward early identification, intervention and prevention of domestic violence and child victimization in rural areas. Finally, the President is committed to finding stable and permanent homes for children who cannot remain safely at home. As a result, the Administration announced Adoption 2002, a plan to double the number of children adopted or placed in permanent homes each year by the year 2002.

WHITE HOUSE CONFERENCE ON EARLY CHILDHOOD DEVELOPMENT & LEARNING
April 17, 1997

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THE VICE PRESIDENT & MRS. GORE

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THE WHITE HOUSE

WASHINGTON

April 16, 1997

MEMORANDUM FOR: INTERESTED PARTIES

FROM: KRIS BALDERSTON

SUBJECT: FINAL UPDATE ON THE EARLY CHILDHOOD REGIONAL SATELLITE SITES

Attached is a near final list and map of the eighty-two (82) regional satellite sites for the White House Conference on Early Childhood Development and Learning which will be held on Thursday, April 17, 1997. (I say "near final" because we continue to get calls from state and local officials including Members of Congress who are planning to hold similar sessions. By Thursday morning, I am sure we will reach nearly 100 sites.) In just three weeks, the Regional Administrators from HHS, Education, USDA, EPA, and GSA set up sites in 36 states (OH, FL, and WI do not appear on the map) in every federal region of the country. As you review the materials, please note the following points:

- These are not just "conference-watching" sessions. In nearly every case, the local organizers have replicated the East Room program. They will watch the morning session via satellite and create their own panel sessions of local experts to discuss early childhood issues in the afternoon. Many plan to develop their own local action plans.

- Each of the satellite sites will distribute White House materials and collect the names of their participants so that we can send each of the attendees a final report. Most of the sites are planning to send the White House a 1-2 page summary of their own proceedings for inclusion in the White House document.

- There is genuine excitement in the regions about participating in this conference. The Regional Administrators note that the local respondents immediately jumped on the opportunity to participate and help organize it. Anecdotally, we have learned that 600 people are planning to attend the Phoenix conference, 300 in Kansas City, 350 in New York City, 200 in San Francisco, 150 in South Texas, and 250 in Philadelphia. In most cases organizers expect an average of approximately 100-150 participants. As you look through the sites, you will note that many of the satellite sessions are being held in hospitals, universities, high schools, and federal buildings.

Finally a special thanks should go to Laura Schwartz for answering a million technical questions from administrators throughout the country, Pat Lewis for answering their press inquiries, (Jay Wolf our Cabinet Affairs intern who spent countless hours inputting the information), and Eric Dodds, the White House Liaison at GSA, who is the main point of contact with the Regional Administrators. Also a thanks to HHS, DoEd, GSA, USDA, and EPA for contributing funds to put the program up on the satellite.

WHITE HOUSE CONFERENCE ON EARLY CHILDHOOD	DEVELOPMENT AND LEARNING APRIL 17, 1997
Boston University -Boston, MA (2 sites)	Illinois Institute of Technology - Chicago, IL
Boston Federal Executive Board - Boston, MA	University of Minnesota - St. Paul, MN
Lesley College - Cambridge, MA	Minnesota Extension Service - St. Paul MN
University of MA - Worcester, MA	Cincinnati Public Schools - Cincinnati, OH
Springfield Technical Community College - Springfield, MA	Indiana State Department of Health - Indianapolis, IA
Brown University - Providence, RI	University of Missouri - Kansas City, MO
University of Rhode Island - Kingston, RI	Epworth Family Learning Center - East Prairie, MO
University of Rhode Island - Providence, RI	Cooperating School Districts of St. Louis County - St. Louis, MO
Stamford Public Schools - Stamford, CT	St. Louis Community College - St. Louis, MO
Groton Public Schools - Groton, CT	Southwest Livingston County R-I School District - Ludlow, MO
New Haven Public Schools - New Haven, CT	Federal Aviation Administration - Kansas City, MO
University of Connecticut - Storrs, CT	Neosho R-V School District - Neosho, MO
University of Vermont - Burlington, VT	Missouri Department of Health - Independence, MO
NH Division of Children, Youth & Families - Concord, NH	Heartland Education Agency - Johnston, IA
University of Maine at Fort Kent - Fort Kent, ME	Child Care Resource and Referral - Des Moines, IA
University of Maine at Orono - Orono, ME	Iowa Pilot Parents Program - Ft. Dodge, IA
Manhattan Borough Community College - New York, NY	Cowles Elementary School - Des Moines, IA
Cornell University - Voorheesville, NY	Kirkwood Community College - Cedar Rapids, IA
Cornell University - Ithaca, NY	Kansas Department of Education - Topeka, KS
Cornell University - Albion, NY	Kansas Dept. Of Social & Rehab. Services - Topeka, KS
Cornell University - Middletown, NY	NW Kansas Education Service Unit - Oakley, KS
PBS TV Affiliate - Rochester, NY	Kansas State University - Manhattan, KS
American Booksellers Association - Tarrytown, NY	Creighton University - Omaha, NE
Rutgers University - Livingston, NJ	Nebraska Department of Education - Lincoln, NE
St. Christopher's Hospital for Children - Philadelphia, PA	Alliance Public Schools - Alliance, NE
Egleston Children's Hospital - Atlanta, GA	Arkansas Children's Hospital - Little Rock, AR
Tennessee University - Nashville, TN	Arkansas River Education Co-Op - Pine Bluff, AR
East Tennessee State University - Johnson City, TN	Texas A&M - Weslaco, TX
University of Tennessee - Knoxville, TN	University of Texas Arlington - Arlington, TX
University of Tennessee - Martin, TN	University of Texas Arlington - El Paso, TX
Chattanooga State Technical Community College - Chattanooga, TN	Our Lady of the Lake University - San Antonio TX
Roper Mountain Science Center - Greenville, SC	Southwest Texas University - San Marcus, TX
Instructional Television Studio - Birmingham, AL	Children's Hospital of Oklahoma - Oklahoma City, OK
North Carolina State University - Raleigh, NC	Tulsa Community College - Tulsa, OK

WHITE HOUSE CONFERENCE ON EARLY CHILDHOOD	DEVELOPMENT AND LEARNING APRIL 17, 1997
Department of Human Services - Hugo, OK	
Albuquerque Technical Vocational Institute - Albuquerque, NM	
Onate High School - Las Cruces, NM	
Southeastern Louisiana University - Hammond, LA	
Colorado Department of Health - Denver, CO (2 sites)	
Auraria Media Center Library - Denver, CO	
Phoenix College - Phoenix, AZ	
Central AZ College - Coolidge, AZ	
San Francisco State University - San Francisco, CA	
Sacramento State University - Sacramento, CA	
Fresno State University - Fresno, CA	
UCLA - Los Angeles, CA	
Mable Smyth Auditorium - Honolulu, HI	
High Desert Conference & Training Center - Las Vegas, NV	
GSA Regional Headquarters - Auburn, WA	

WHITE HOUSE CONFERENCE ON EARLY LEARNING AND DEVELOPMENT QUESTIONS AND ANSWERS

GENERAL QUESTIONS ON THE CONFERENCE

Q. What will be discussed at the conference?

The conference will highlight new research on brain development in very young children and discuss what it means for parents, caregivers and policy makers. We now know that children's earliest experiences actually affect the development of their brains and are essential to their ability to learn, develop, and reach their full potential. This conference will be a call to action to all members of society -- including the business, faith and health communities, the media, child care providers and government -- to use this information to strengthen America's families.

Q. What kind of impact do you expect this conference to have?

We hope that this conference will mark the beginning of a national dialogue on how best to support, stimulate, and nurture children in the first years of life. That means a national dialogue on how to provide high quality, affordable child; how to make sure children have health insurance; and how to give them early educational opportunities. We also hope to send a simple message to parents and caregivers: that they should read to, sing to, play with and talk to children in the earliest years.

Q. How can the President reconcile his interest in early childhood development with the fact that he signed a welfare bill that will throw over a million children into poverty?

The President signed welfare reform because he believes that we need to end the cycle of dependency and help all Americans take responsibility for their own lives. The President believes -- and all the evidence suggests -- that children who grow up in households and communities where there's work will be far better off in the long run than those who don't. The welfare bill dramatically expanded the availability of child care for people moving from welfare to work, while preserving health, safety and other quality standards for child care.

Q. Doesn't this new research mean that women should stay home?

No. What the research suggests is that we should support all parents, those who work outside the home and those who don't. There are terrifically engaged parents who go to work, and there are parents who stay home but don't know or chose to spend time talking, reading and singing to their children. A recent report indicates that children in quality child care settings do just as well as children whose mothers stay home. What's most important is that children are surrounded by loving, nurturing caregivers who understand the importance of the first few years of life.

Q. Doesn't this new research mean that we can stop investing in children once they reach the age of three?

No. It would be nonsensical to stop spending money on things like crime prevention, schools, and job training. But we now know that early childhood is a critical time in children's development. Investments early can reduce the need for investments later, and we ought to set our priorities with that in mind.

Q. Given the new research, do you see an enhanced role for government in the lives of young children?

There are certainly things that government can do. The President fought for Family and Medical Leave so that workers can take leave to care for a newborn or adopted child, and he has proposed to expand FMLA to allow people to take up to 24 hours off each year for things like finding child care or school activities. The President has also expanded Head Start and created Early Head Start, increased participation in WIC, and raised immunization rates. But parents are responsible for raising their children. The purpose of this conference is to share information about what we can all do to enhance our children's development and learning, and to highlight model community efforts that are working across the country to support children and families.

Q. Isn't this conference just about government intruding into the family?

No. Parents raise children but, like it or not, children are influenced by businesses, schools, the media, and the government, to take just a few examples. This purpose of this conference is to share information about what we can all do to enhance our children's development and learning. The conference will also highlight model community efforts that provide voluntary assistance to parents and children, although most of these local initiatives do so with financial support from the federal government.
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QUESTIONS ON POLICY INITIATIVES

<u>Department of Defense</u>

Q. You are holding the military child care system up as a model. Why is it so good?

The military child care system is noted for its high quality standards, including a high percentage of accredited centers; a strong oversight and enforcement system, that includes a 1-800 hot line for parents to report concerns; mandatory training for child care providers; relatively generous wages and benefits tied to continued training and education; a system of linking up and providing needed support to individual home care providers; and sufficient funding to make quality child care affordable.

Q. Isn't the military child care system so good because the military spends so much to fund it?

Experts agree that the military child care system is the best in the country for a number of reasons. It is true that the military recognizes that quality child care costs more than most parents can afford to pay and, therefore, the Department of Defense provides sufficient funding so that parents can afford the fees.
[NOTE: The military pays 50% of child care costs with appropriated funds. Parents pay according to a sliding scale based on income. Last year the average weekly fee was $65 per week.]

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The President has proposed a $500 per child tax credit, expanded the Earned Income Tax Credit to help working families with children and, in the welfare reform law, increased federal funding for child care by $1 billion, providing services for over 660,000 children -- 65% of whom are under 5 years old.

Q. Why should the military use their resources to help civilian child care providers?

There's no doubt that the military's first priority is protecting the national security and supporting its own service members. This initiative will not undermine that mission. Much of this can be done without a significant expenditure of dollars. One piece of evidence that that is true is that the military is already reaching out to civilian child care providers in their communities, though in a less comprehensive, coordinated way. This initiative will also benefit the military by providing workers for its child care centers and by increasing the number of available spaces.

Health Care

Q. Many Congressional Republicans say they are opposed to new entitlements. How are you going to convince them to expand health care coverage?

The President's children's health proposal is not a new entitlement, but a capped program which gives states the flexibility to design innovative ways to extend health coverage to uninsured children. This carefully targeted investment has been fully paid for in the President's balanced budget. Moreover, we have seen enormous interest from both Republicans and Democrats in expanding health care for children, and we are optimistic that we will be able to pass a children's health bill this year.

Q. Couldn't you reach these children more effectively through an existing mechanism such as the Medicaid program, the tax code, or an existing discretionary program?

The President wants to pass bipartisan legislation that will extend health care coverage to up to five million uninsured children. He is willing to consider any ideas that will enable us to reach this goal.

Q. Is it really worth cutting $22 billion from Medicaid and implementing a per capita

cap just to expand coverage to a few more children?

First of all, the President has proposed $7 billion in net savings in Medicaid, which represents a reduction of about 1% off of the current Medicaid baseline over the next five years. Also, the President's plan to expand coverage to more children is not paid for solely from our savings in Medicaid. Moreover, because under a per capita cap States would get more dollars when they cover additional children and because children are relatively inexpensive to cover, we believe that this policy may well provide States with positive incentives to extend health care coverage to more children.

Q. Does the President support the Kennedy-Hatch children's health care bill which finances children's health care expansions by increasing the tobacco tax?

First of all, the President is delighted that there is so much bipartisan interest in expanding health coverage to children, and he will continue to work with Senators Kennedy and Hatch and others in Congress to pass a balanced budget this year that extends health care coverage to more uninsured children.

While the Hatch-Kennedy bill pays for new expansions by increasing the tobacco tax, the President has a proposal which would expand coverage to millions of additional children and is paid for in the context of his balanced budget plan. Regardless of the source of financing, assuring a significant commitment for children's health care will continue to be a top priority for the President.

That being said, studies of State excise tax increases indicate that they can have significant public health benefits, particularly for children and adolescents, because the increased cost can discourage them from starting and continuing to smoke.

Q. The Hatch-Kennedy children's health coverage bill seems to be losing support even by some of its cosponsors because of the tobacco tax financing. Are you concerned about these recent developments?

No piece of legislation in this town experiences smooth sailing throughout the legislative process. The President continues to be very encouraged by the strong bipartisan support for an investment in children's health coverage. In addition to the Hatch-Kennedy bill, a number of others in Congress are coming forward with proposals to expand children's health insurance. Just this week, Nancy Johnson joined the list of Republicans who have put forth proposals on to expand children's health care coverage. And we expect there will be many more. This should be a major priority for this Congress, and it is a top priority for the President.

<u>Safe Start</u>

Q. What is Safe Start?

Safe Start is a program designed to change the way law enforcement officers respond to children who are the victims of or witnesses to violence. The program will provide training on early childhood development to community police officers, prosecutors, probation and parole officers, school personnel and mental health providers. It prepares the people on the frontline to respond better to the needs of children who have been exposed to violence, and to intervene in time to prevent any further evidence.

Q. How much will this program cost?

In fiscal year 1997, the Department of Justice will spend $700,000 of already appropriated funds on the program.

Q. How many individuals and communities will be reached by Safe Start?

Safe Start builds on a program that is already in place. In addition to providing additional intensive training and technical assistance to the four communities already taking part in the program, the Department of Justice will involve four additional communities and will provide training on early childhood development to 20,000 law enforcement and other professionals in more than 50 communities.

Q. Is President Clinton trying to turn police officers into social workers?

No. New Haven Policy Chief Wearing -- part of the panel at today's conference -- is a cop's cop, who rose up the ranks from detective to police chief. He will tell you that his department's partnership with the Yale Child Study Center helps stop the cycle of violence by providing early intervention to children who are exposed to violence and who, if left untreated, would be more likely to become violent offenders themselves.

<u>Early Head Start</u>

Q. Aren't many more children eligible for Early Head Start than are being served?

We estimate that nearly 3 million children ages 0 to 3 are eligible for Early Head Start while only 23,000 are currently served. However, Early Head Start is a very new program. The first Early Head Start grants were awarded in October 1995. The President's 1998 budget would nearly double the number of children and families served, from 18,000 in fiscal year 1995 to 35,000 in fiscal year 1998. The President is committed to continuing to support this program.

Q. Have the organizations who will receive this new funding been selected?

No. Today, we are announcing a competition for this funding. The Department of Health and Human Services expect to announce the new grantees in September.

Ready*Set*Read Kits

Q. How were the kits developed?

Fifty reading, literacy and early childhood groups worked with the Department of Education on the basic design for the kits. The materials were then developed by researchers from the Early Childhood Technical Assistance Center, and finally a working group of families, caregivers and early childhood administrators reviewed and commented on them.

Q. How and when will these kits be distributed?

In May, kits will be mailed to families served by early childhood programs across the country like Even Start, Foster Grandparents, and Learn and Serve Early Childhood Programs. It will also be available to the public through the Department of Education's toll-free number at 1-800-USA-LEARN and will be available on the Internet through the Department of Education's home page. The kits are available in Spanish and English.

ASSOCIATION OF AMERICAN MEDICAL COLLEGES
2450 N STREET, NW WASHINGTON, DC 20037-1127
PHONE 202-828-0400 FAX 202-828-1125
Jordan J. Cohen, M.D., President

April 17, 1997

The President
The White House
Washington, DC 20500

Dear Mr. President:

On behalf of the Association of American Medical Colleges (AAMC), I write to express our strong support for your efforts to extend health care coverage to the ten million American children who are currently without coverage.

Recent studies have shown that the reduction in the availability of health insurance has disproportionately affected children in part due to the decline in employment-based dependent coverage coupled with the general reduction of employment-based coverage. As you know, lack of health insurance coverage has been shown to be a deterrent for individuals both in requesting and receiving care. As a result, many uninsured persons seek treatment for themselves and their family when their condition is more advanced and, as a result, more difficult and expensive to treat. For a child, forgoing needed medical care can have implications that last a lifetime.

The AAMC represents all of the nation's 125 accredited medical schools, approximately 400 major teaching hospitals, including 75 Veterans Affairs medical centers, the faculty of these institutions through 89 constituent academic society members and the more than 160,000 men and women in medical education as students and residents. The AAMC member institutions, which have the multiple missions of education and training, research and direct patient care, are acutely aware of the rise in the number of uninsured Americans, many of whom seek treatment at our institutions.

As you strive to reach an agreement on a balanced budget, the AAMC strongly supports your efforts as well as those on Capitol Hill to include a significant investment to expand health insurance coverage for children. We are prepared to work with you, your staff and members of Congress to achieve this critical objective for our nation's children.

Sincerely,

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WHITE HOUSE CONFERENCE ON EARLY LEARNING AND DEVELOPMENT QUESTIONS AND ANSWERS

GENERAL QUESTIONS ON THE CONFERENCE

Q. What will be discussed at the conference?

The conference will highlight new research on brain development in very young children and discuss what it means for parents, caregivers and policy makers. We now know that children's earliest experiences actually affect the development of their brains and are essential to their ability to learn, develop, and reach their full potential. This conference will be a call to action to all members of society -- including the business, faith and health communities, the media, child care providers and government -- to use this information to strengthen America's families.

Q. What kind of impact do you expect this conference to have?

We hope that this conference will mark the beginning of a national dialogue on how best to support, stimulate, and nurture children in the first years of life. That means a national dialogue on how to provide high quality, affordable child; how to make sure children have health insurance; and how to give them early educational opportunities. We also hope to send a simple message to parents and caregivers: that they should read to, sing to, play with and talk to children in the earliest years.

Q. How can the President reconcile his interest in early childhood development with the fact that he signed a welfare bill that will throw over a million children into poverty?

The President signed welfare reform because he believes that we need to end the cycle of dependency and help all Americans take responsibility for their own lives. The President believes -- and all the evidence suggests -- that children who grow up in households and communities where there's work will be far better off in the long run than those who don't. The welfare bill dramatically expanded the availability of child care for people moving from welfare to work, while preserving health, safety and other quality standards for child care.

Q. Doesn't this new research mean that women should stay home?

No. What the research suggests is that we should support all parents, those who work outside the home and those who don't. There are terrifically engaged parents who go to work, and there are parents who stay home but don't know or chose to spend time talking, reading and singing to their children. A recent report indicates that children in quality child care settings do just as well as children whose mothers stay home. What's most important is that children are surrounded by loving, nurturing caregivers who understand the importance of the first few years of life.

Q. Doesn't this new research mean that we can stop investing in children once they reach the age of three?

No. It would be nonsensical to stop spending money on things like crime prevention, schools, and job training. But we now know that early childhood is a critical time in children's development. Investments early can reduce the need for investments later, and we ought to set our priorities with that in mind.

Q. Given the new research, do you see an enhanced role for government in the lives of young children?

There are certainly things that government can do. The President fought for Family and Medical Leave so that workers can take leave to care for a newborn or adopted child, and he has proposed to expand FMLA to allow people to take up to 24 hours off each year for things like finding child care or school activities. The President has also expanded Head Start and created Early Head Start, increased participation in WIC, and raised immunization rates. But parents are responsible for raising their children. The purpose of this conference is to share information about what we can all do to enhance our children's development and learning, and to highlight model community efforts that are working across the country to support children and families.

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CLINTON ADMINISTRATION'S SAFE START INITIATIVE

Announcement

- Today at the White House Early Childhood Development and Learning Conference, the President announced a new Safe Start Initiative to help break the cycle of violence for our nation's youngest victims. The Safe Start Initiative will provide training to law enforcement, prosecutors, school personnel, probation officers, and other professionals to better respond to the needs of children exposed to violence in their homes and communities.

The Problem

- Throughout America, too many children are exposed to violence at home, in their neighborhoods, and in their schools. Children's exposure to violence has been associated with increased depression, anger, substance abuse, and lower academic achievement. Children who experience violence either as victims or witnesses also are at increased risk of becoming violent themselves.

- In a study conducted at Boston City Hospital, 1 out of every 10 children seen in its primary care clinic had witnessed a shooting or stabbing before the age of 6 -- half in their homes and half in the streets. The average age of these children was only 2.7 years old.

The Safe Start Initiative

- The Safe Start Initiative builds on the Child Development-Community Policing Program (CD-CP) started in 1991 between the New Haven Department of Police Services and Yale University Child Study Center, and now funded by the Department of Justice. It was more recently extended to Buffalo, NY; Charlotte, NC; Nashville, TN; and Portland, OR, with Justice Department funding.

- The Safe Start Initiative will increase the number and expand the scope of these regional demonstration sites in which community police officers partner with mental health clinicians to provide rapid and effective treatment to children exposed to violence.

- The Safe Start Initiative will also provide nationwide intensive training and technical assistance for professionals who come into contact with children who have been exposed to family and gang violence, violence in their community and schools, and abuse or neglect.

- Up to 20,000 professionals who work with children in communities across the nation will receive Safe Start training including: law enforcement, prosecutors, school personnel, and probation and parole officers.

CLINTON ADMINISTRATION EFFORTS TO SUPPORT THE DEVELOPMENT OF AMERICA'S YOUNGEST CHILDREN

"Learning begins in the first days of life. Scientists are now discovering how young children develop emotionally and intellectually from their very first days, and how important it is for parents to begin immediately talking, singing, even reading to their infants....We already know we should start teaching children before they start school."

-- President Bill Clinton, State of the Union Address, February 4, 1997

Recent scientific research has demonstrated that experiences during the earliest years of life -- before children reach school age -- are critical to their cognitive, emotional, and physical development. Nurturing and stimulating children in the first years of life actually help their brains develop and prepare them for the challenges of school and later life. President Clinton is committed to giving America's children the opportunity to live up to their God-given potential by investing in research, supporting parents and caregivers, and strengthening programs that provide early intervention to disadvantaged families.

PROTECTING OUR CHILDREN'S HEALTH

Supported Over 90% of all Children's Research. In fiscal year 1995, the federal government spent an estimated $2 billion on research and development directly related to children and youth -- over 90% of all funding of children's research. Spending on children's health research at The National Institutes of Health (NIH) increased 25% between 1993 and 1997, and this year NIH will spend $904 million on research on young children alone. This research has contributed to the recent advances in understanding early learning and language development.

Increased participation in WIC program. WIC Supplemental Nutrition Program provides nutrition packages, nutrition education, and health referrals to low-income pregnant women, infants, and children. Over the past four years participation has expanded by 1.7 million from 5.7 to 7.4 million women, infants, and children. The increase in the President's budget proposal fulfills his commitment to achieving full participation in WIC by the end of 1998. Research shows that WIC prenatal services save Medicaid much more than they cost by reducing health care expenses in the first 60 days after birth.

Raised Childhood Immunization Rates to an All-Time High. The President's Childhood Immunization Initiative focuses on five areas: 1) improving the quality and quantity of vaccination delivery services; 2) reducing vaccine costs for parents; 3) increasing community participation, education and partnerships; 4) improving systems to monitor diseases and vaccinations; and 5) improving vaccines and vaccine use. This initiative has achieved notable

success. In 1995, 75% of two-year olds were fully immunized -- an historic high. Funding for childhood immunization has doubled since fiscal year 1993.

Protected the Medicaid Guarantee for 9 Million Children Under 6 Years Old. This Administration has protected and, preserved -- and now will improve on -- the guarantee of Medicaid coverage for 36 million Americans, including 9 million children under the age of 6. In 1995, the President vetoed the Republican Medicaid block grant proposal that would have ended the guarantee of coverage for up to 4 million children by 2002. At the same time, the President worked with states by granting 15 comprehensive Medicaid waivers and approving many more state plan amendments that improve and expand coverage for children.

Seeks to Extend Health Coverage to Up to 5 Million Children. Although this Administration has made great strides in protecting the health of America's neediest children, there is still much to be done. In 1995, more than 10 million American children, 80% of whom have working parents, had no health insurance. The President's budget takes three important steps to address the problem of children who lack health insurance coverage:

1) Provides annual grants to states to cover health insurance premiums for families of workers who are in-between jobs;
2) Utilizes state partnership grants to help working families who are not eligible for Medicaid to purchase private insurance for their children; and
3) Expands Medicaid coverage by allowing states to continue Medicaid coverage for up to one year even if family income changes, intensifying outreach to children who are currently eligible but not enrolled, and continuing current law expansions of coverage to reach poor children between the ages of 13 and 18.

Fighting Pediatric AIDS. In 1994, the National Institutes of Health released new research showing that the use of the drug AZT by HIV-infected pregnant women can reduce the risk of transmission from mother to child by two-thirds. In response, the Food and Drug Administration quickly approved changes in labeling indications for AZT to include HIV-infected pregnant women and, in 1995, the Centers for Disease Control began recommending routing HIV counseling and voluntary HIV testing for all pregnant women. In addition, the President has consistently supported investment through Title IV of the Ryan White CARE Act, which provides grants for coordinated HIV services and access to research for children, women and families. Since 1994, $113 million has been appropriated under Title IV, with 59 organizations in 26 states, Puerto Rico and the District of Columbia receiving support.

Protecting Mothers and Children. Due to the Clinton Administration's comprehensive strategy to increase access to prenatal care, the preliminary estimate for the U.S. infant mortality rate (the rate at which babies die before their first birthday) is at an historic low of less than 8 deaths per 1,000 live births in 1995, and the proportion of mothers getting early prenatal care is at a record high of 81%. In addition, the President spearheaded legislation requiring insurance companies to cover at least 48 hour hospital stays following childbirth. In 1970, the average length of stay for an uncomplicated delivery was four days, but by 1992 it had declined to two days. This legislation ensures that mothers and babies do not leave the hospital before they and their doctors decide they are ready. The Administration is ensuring that the health needs of mothers and

children are met by providing over $1 billion in FY 97 for Title V Maternal and Child Health Programs. The Maternal and Child Health Block Grant, one of the Title V programs, serves approximately 17 million women, infants and children, in partnership with states. In addition, Title V programs provide comprehensive care for children with special health needs, meet nutritional and development needs of mothers and children and help reduce infant mortality.

Preventing Sudden Infant Death Syndrome (SIDS). The Clinton Administration launched the Back to Sleep public education campaign to send the message to parents and health professionals that putting babies to sleep on their backs can reduce the risk of Sudden Infant Death Syndrome. Largely as a result of this campaign, SIDS deaths dropped by 30% between 1992 and 1995.

PROMOTING EARLY LEARNING

Increased participation in Head Start, created Early Head Start for 0-3 year olds, and improved program quality. For more than thirty years, Head Start has been one of our nation's best investments. President Clinton has made improving and expanding Head Start a priority because Head Start ensures that low-income children start school ready to learn. Over the past five years, funding for the program has increased by 80%, and in fiscal year 1997 Head Start will serve 800,000 low-income children five years old and younger. Initiated in 1994, there are now 143 *Early Head Start* programs across the country, expanding the proven benefits of Head Start to low-income families with children under three. Over the last three years, the Clinton Administration has also invested significantly in improving program quality and providing local programs with the resources they need to attract and retain high quality teachers. The President's 1998 budget proposal provides a $324 million increase in Head Start's budget so that it will remain on course to serve 1 million children by 2002.

Improved Support for Infants and Toddlers with Special Needs. Under the Individuals with Disabilities Education Act (IDEA), the Infants and Families Program supports the continuing efforts of states to implement high quality statewide early intervention services for infants and toddlers with disabilities. Over the past four years, funding for the program has increased by 48% or $102.5 million. During the same period, the number of children served increased by 21.5%. An estimated 191,000 children will be served in fiscal year 1998.

Enhanced Family Literacy Program. Even Start Family Literacy is a family-focused grant program to improve the educational opportunities for children and their parents in low-income areas by integrating family literacy activities, including early childhood education, adult education, and parenting education. Since 1993, funding for Even Start has increased by over 40% to support programs in every state and the District of Columbia.

Providing Funding for Parent Resource Centers in 42 States. In addition to involving parents in the development of state and local education plans, the President's Goals 2000 program provides funding to establish parent resource centers that help parents learn how to help their children meet high standards. The centers provide training, distribute resource materials, and support a variety of programs that strengthen family involvement in education. In fiscal year 1997, funding is available for support centers in 42 states, 14 more than in 1996.

Promoting Parents as First Teachers. The President's America Reads Challenge, a campaign to ensure that every child can read well by the end of the third grade, includes Parents as First Teachers Challenge Grants to fund proven local, regional and national programs that provide assistance to parents to help their children become successful readers. The grants can be used to expand successful programs such as the Home Instruction Program for Preschool Youngsters (HIPPY) and the Parents as First Teachers (PAT) program. They will also fund national and regional networks to share information on how parents can help children to read.

IMPROVING CHILD CARE

Increased Child Care Funding. Since 1993 federal funding for child care has increased by $1 billion, providing services for over 660,000 children -- 65% of whom are under 5 years of age. The newly established Child Care and Development Fund (CCDF) has made available $2.9 billion to states. The new fund, authorized and expanded by the new welfare law, will assist low-income families working their way off welfare to obtain child care so they can work or attend school.

Improved Child Care in Public Housing. The Early Childhood Development Program helps to provide quality child care for families living in public housing communities, as well as families who are homeless or at risk of becoming so. The program allows parents or guardians who live in public housing to get and keep jobs by ensuring that their children are cared for. In 1996, $21 million was awarded to public housing sites across the country -- three times more than in 1994.

Providing High Quality Child Care for Military Families. Under the Clinton Administration, the Department of Defense has made important strides to improve the quality of child care for the children of the men and women who serve our country. Since 1992, the number of military child care facilities that are accredited by the independent National Association for the Education of Young Children has risen from 55 to 466. Currently, 72% of military child care programs are accredited, as compared to only 7% of other child care facilities nationwide.

SAFEGUARDING THE ENVIRONMENT

Controlling Childhood Lead Poisoning. The Administration has launched a major new effort to control childhood lead poisoning. The program requires landlords and sellers of older homes to notify prospective tenants and buyers about lead-based paint hazards, provides grants to states to control lead-based paint hazards in low-income privately-owned homes, and offers technical assistance to ensure that lead hazard control work is done safely and efficiently. The 1997 interim report evaluating the HUD Lead-Based Point Hazard Control grant program shows that median dust levels on interior window sills were reduced by 85 %. In addition, the number of children suffering from lead poisoning dropped from 1.7 million in the late 1980s to about 930,000 in the mid-1990s.

Protecting Our Children's Environment. Because their bodies are still developing, children are among the most vulnerable to pollution in the air, water and soil. In 1995, the Clinton Administration began requiring that children receive first consideration when EPA assesses

environmental hazards and sets public health standards. In addition, the Clinton Administration has strengthened environmental protections for children by: proposing to strengthen air quality standards for soot and smog to protect children from air pollution, particularly those with asthma; speeding the clean-up of two-thirds of the nation's toxic waste sites to protect the 10 million children under age 12 who live within four miles of a toxic waste dump; strengthening drinking water protections to ensure that drinking water is free of microbial contaminants; expanding families' right to know about environmental health risks that infants and children face to help them make informed decisions about their children's exposure to these risks; issuing advisories about contaminated fish so parents can protect children from cancer-causing PCBs; and educating parents about the effects of second-hand smoke, which annually results in 7,500 to 15,000 hospitalizations of infants and children under 18 months of age.

STRENGTHENING FAMILIES

Passed Family and Medical Leave. The President fought for the passage of the Family and Medical Leave Act (FMLA) that allows workers to take up to 12 weeks unpaid leave to care for a newborn or adopted child, to attend to their own serious health needs, or to care for a seriously ill parent, child or spouse. In June 1996, President Clinton proposed expanding FMLA to allow workers to take up to 24 unpaid hours off each year for school and early childhood education activities, routine family medical care, and additional activities related to caring for an elderly relative. Last week, the President asked Federal agencies to implement his expanded leave policy immediately for Federal workers.

Improved Children's Television. The President announced a breakthrough agreement with the media and entertainment industry to develop a television ratings system to enable parents to protect their children from violence and adult content. In addition, the Administration has given parents greater control over what their children watch on television by requiring the installation of anti-violence screening chips ("V-chips") in all new televisions.

Reducing Child Abuse and Domestic Violence. The Administration created the Safe Streets/Safe Kids initiative to make community responses to child abuse and neglect more comprehensive and coordinated in an effort to break the cycle of early childhood victimization and later delinquency. The Administration also put in place a nurse home visitation program for low-income first-time mothers. Studies have shown that home visitation programs are successful -- for example, reducing cigarette smoking during pregnancy by 25% and reducing mistreatment of children from birth to age 2 by 80 percent. The Clinton Administration has also taken significant steps to reduce domestic violence. For example, the Rural Domestic Violence and Child Victimization Enforcement Grant Program helps law enforcement agencies, courts community organizations and businesses to work toward early identification, intervention and prevention of domestic violence and child victimization in rural areas. Finally, the President is committed to finding stable and permanent homes for children who cannot remain safely at home. As a result, the Administration announced Adoption 2002, a plan to double the number of children adopted or placed in permanent homes each year by the year 2002.

WHITE HOUSE CONFERENCE ON EARLY CHILDHOOD DEVELOPMENT AND LEARNING POLICY ANNOUNCEMENTS

Today, the President and First Lady are hosting ***The White House Conference on Early Childhood Development and Learning: What New Research on the Brain Tells Us About Our Youngest Children***. The day-long conference highlights new scientific findings on brain development in very young children and points to the importance of children's earliest experiences in helping them get off to a strong and healthy start and reach their full potential.

Clinton Administration Commitment to Young Children. The Clinton Administration has invested heavily in research to help us better understand the importance of the first few years of life to child development and learning. President Clinton has also strengthened efforts to support families with young children by investing in Head Start and Early Head Start, the WIC Supplemental Nutrition Program, immunization and other early childhood programs.

At the conference, the President will make a series of policy announcements that build on the Clinton Administration's commitment to young children:

Improving the Quality of Child Care By Learning from the Military. Child care experts believe that the military child care system is now the best in the country. The President is issuing an executive memorandum directing the Secretary of Defense to use the Department's expertise to help improve child care across the nation. The memorandum urges the Department to consider: (1) creating partnerships with civilian child care centers in the community to help them improve quality; (2) providing training courses for civilian child care providers; (3) sharing the materials and models for worker training, accreditation and evaluation, facility design, financing, and other ingredients of the military's success; and (4) working with States and local governments to enable military child care facilities to serve as training sites for welfare recipients moving from welfare to work.

Providing Health Coverage for Children. The President's fiscal year 1998 budget includes a children's health initiative that will extend coverage to up to 5 million uninsured children by the year 2000 by strengthening Medicaid for poor children, building innovative State programs to provide coverage for working families, and continuing health coverage for children of workers who are between jobs. Today, the Association of American Medical Colleges issued a letter of support for the Clinton Administration's children's health proposal.

Importance of Early Education. The President recognizes that children must be nurtured and stimulated in the earliest years. That is why he is announcing two initiatives geared toward early learning.

- **Expanding Early Head Start.** The Department of Health and Human Services is requesting proposals for new Early Head Start programs to expand Early Head Start enrollment by one-third next year. Created by the Clinton Administration in 1994, the Early Head Start program brings Head Start's successful comprehensive services to families with children ages zero to three and to pregnant women.

- **Giving Parents and Caregivers Early Childhood Tools**. The President's America Reads

Challenge is releasing "Ready*Set*Read" early childhood development activity kits. The kits offer suggestions to families and caregivers about developmentally appropriate activities for children ages zero to five. They will be distributed in May to early childhood programs across the country and to callers to the Department of Education's 1-800-USA-LEARN hotline.

Safe Start. The Department of Justice is establishing "Safe Start" to change the way law enforcement officers respond to children who are the victims of or witnesses to violence. The program will provide training on early childhood development to community police officers, prosecutors, probation and parole officers, school personnel and mental health providers. It will better prepare law enforcement officials to respond to young children exposed to violence and can help prevent today's children from turning into tomorrow's criminals. The initiative is built on the successful partnerships between community police officers and mental health providers funded by DOJ in New Haven, Connecticut and three other communities.

PRESIDENT CLINTON'S CHILDREN'S HEALTH INITIATIVE

Significant gaps remain in children's health coverage. In 1995, 10 million children in America lacked health insurance. The President's children's health initiative will extend coverage to up to 5 million uninsured children by 2000 by strengthening Medicaid for poor children, building innovative State programs for working families, and continuing health coverage for children of workers who are between jobs. **Today, the Association of American Medical Colleges issued a letter of support for the Clinton Administration's children's health initiative.**

Strengthening Medicaid for Poor Children

- **12-Month Continuous Eligibility.** Currently, many children receive Medicaid protection for only part of the year. The President's fiscal year 1998 budget gives States the option to provide one year of continuous Medicaid coverage to children. The budget invests $3.7 billion over five years, covering an estimated million children who would otherwise be uninsured.

- **Outreach.** The President also proposes to work with the Nation's Governors, communities, advocacy groups, providers, and businesses to develop new ways to reach out to the 3 million children eligible but not enrolled in Medicaid.

Building Innovative State Programs for Children in Working Families

- The President's budget provides $3.8 billion between 1998 to 2002 ($750 million a year) in grants to States. States will use these grants to provide insurance for children, leveraging State and private investments in children's coverage through a matching system (as in Medicaid). States have flexibility in designing eligibility rules, benefits (subject to minimums set by the Secretary), and delivery systems.

- The Federal grants, in combination with State and private money, will cover an estimated one million children whose families earn too much to qualify for Medicaid but too little to afford private coverage. The grant program will also increase Medicaid enrollment by about 400,000 kids since some families interested in the new program will learn that their children are in fact eligible for Medicaid.

Continuing Coverage for Children Whose Parents are Between Jobs

- The President's budget will give States grants to temporarily cover workers between jobs, including their children, at a cost of $9.8 billion over the budget window. The program, which is structured as a four-year demonstration, will offer temporary assistance (up to 6 months) to families who would otherwise lose their coverage. This assistance may be used to purchase coverage from the worker's former employer (through COBRA) or other private plans, at States' discretion.

- This initiative will help an estimated 3.3 million working Americans and their families, including 700,000 children, in any given year.

- The President's budget also makes it easier for small businesses to establish voluntary purchasing cooperatives, increasing access to insurance for workers and their children.

FINAL WHSO LAYOUT - **REVISED**
a/o 4/16/97; Sfarnsworth

WHITE HOUSE CONFERENCE ON EARLY CHILDHOOD DEVELOPMENT & LEARNING: WHAT NEW RESEARCH ON THE BRAIN TELLS US ABOUT OUR YOUNGEST CHILDREN
Thursday, April 17, 1997

Conference Sessions:	East Room (Pool Press/Satellite 1st session)
Lunch:	State Dining Room (Closed Press)
Reception:	South Lawn (Closed Press)
Guest invite time:	10 a.m.

PRINCIPAL time:

9:45 a.m.-10:25 a.m.	Guest Coffee in the Grand Foyer
10 00 a.m.-10:30 a.m.	POTUS and FLOTUS Briefing in the Map Room
10:35 a.m.-10:45 a.m.	Greet Panel I in the Blue Room
10:50 a.m.-1:00 p.m.	Session I in the East Room (Refer to separate breakdown)
1:20 p.m.-2:30 p.m.	Lunch in the State Dining Room (Closed Press) (FLOTUS only)
2:30 p.m.-2:40 p.m.	Session II Pre-Brief in the Map Room (All Four Principals)
2:35 p.m.-2:45 p.m.	Greet Panel II in the Blue Room (POTUS, FLOTUS, VPOTUS, MEG)
2:45 p.m.-4:30 p.m.	Session II in the East Room (Refer to separate breakdown)
5:15 p.m.-5:45 p.m. (T)	Remarks to Reception guests on the South Lawn (Closed Press)

8:00 a.m.-8:30 a.m. (T) **The First Lady** is interviewed on the TODAY SHOW in the Diplomatic Reception Room. (Contacts: S. Cohen, T. Labrecque)

7:00 a.m. Set up in the East Room. (Staging, seating, visuals, whca)
Satellite contact: Laura Schwartz Set up: J. King (visual), S. Warren, L. Schwartz

9:00 a.m. Panel I participants are briefing in OEOB 180. Contact: Katy Button

9:30 a.m. East Visitor Gate opens for guest arrival. Guests proceed to the Grand Foyer for coffee and juice until time to be seated in the East Room. *List contact: Kim Widdess*

Note: The AdCoucil PSA will be played on at WHTV monitor in the Grand Foyer at this time. (L. Schwartz)

10:00 a.m. **Principal Briefing** in theMap Room. (Need list of participants and agenda- Christa)

10:30 a.m. Guests are seated in the East Room by Social Aides. Panel I participants are escorted to the Blue Room. (Seating contact: S. Warren)

10:35 a.m. **The President and the First Lady** arrive in the Blue Room to greet Panel I participants.

10:45 a.m. Panel I participants are announced into the East Room and proceed to seats at table.

The President and the First Lady are announced into the East Room and proceed to podium.

10:50 a.m.-1:00 p.m. **SESSION I:**

SESSION I:	
10:50 -11 a.m	**The First Lady** delivers remarks and introduces the President. (Remember sat sites)
11-11:15 a.m.	**The President** delivers remarks. Following remarks, the President and the First Lady proceed to seats at the table.
11:15-11:20 a.m.	**The President** calls on **David Hamburg**, President, Carnegie Corporation of New York, who delivers brief remarks and introduces the next three consecutive speakers.r.
11:20-11:55 a.m.	Three Consecutive Presentations by: - **Dr. Donald Cohen**, Director, Yale Child Study Center (behavioral development) - **Dr. Carla Shatz**, University of California, Berkeley (neuroscientific overview) - **Dr. Patricia Kuhl**, University of Washington (language/cognitive development) (Each presenter has 5 min.)
11:55 a.m.-12 p.m.	**The President** thanks the first three speakers and asks the next three speakers to make remarks: (Optional questions between each speaker)
12 p.m.-12:50 p.m.	Q&A Session with the following panelists: (Questions by POTUS/FLOTUS) - Dr. Ezra Davidson, Drew University of Medicine (obstetrician) - Dr. T. Berry Brazelton, Harvard Universtiy (pediatrician) - Dr. Deborah Phillips, National Research Council (child care/earley education)
12:50 p.m.-1:00 p.m.	**The President** makes closing remarks.

Satellite Note: Satellite time ends at 1:10 p.m.

1:00 p.m. Upon conclusion of the first session, **the President and the First Lady** depart the East Room.

Guests will be directed to the State Dining Room for lunch. (20 min break before lunch) Guests will receive escort cards prior to entering the State Dining Room.

1:20 p.m. **The First Lady** proceeds to table in the State Dining Room for lunch.

1:20 p.m.-2:30 p.m. **LUNCH IN THE STATE DINING ROOM**
Staff Contacts: Robyn Dickey (Seating), Tracy Labrecque

2:15 p.m. **The First Lady** invites tbd Members of Congress to come up to the toast lectern to make brief remarks. (TBD order)

FORMAT:
- Seated lunch/Max 130 guests
- Closed Press
- Principals attending: FLOTUS only
- After lunch, TBD Members of Congress will make remarks
- Guests receive escort cards from table outside the State Dining Room.

2:30 p.m Upon conclusion of lunch, guests are directed to their seats in the East Room. (20 min. break)

2:30 p.m. **Briefing for Session II in the Map Room**. (All Four Principals meet in the Map Room.)

2:40 p.m. Session II panelists arrive in the Blue Room. (Contact: Christa, Pauline)

2:45 p.m. **The President and the First Lady and the Vice President and Mrs. Gore** arrive in the Blue Room to greet the panelists for the second session.

2:55 p.m. Session II panelists are announced into the East Room and proceed to seats at table.

The President and the First Lady and the Vice President and Mrs.Gore are announced into the East Room and proceed to seats at the table.

3:00 p.m.-4:30 p.m. **SESSION II**

SESSION II (All remarks are from the table.)	
3:00 p.m.-3:10 p.m.	**Mrs. Gore** makes opening remarks and introduces the Vice President. **The Vice President** makes remarks and introduces the First Lady.
3:10 p.m.-4:15 p.m.	**The First Lady** moderates second session with the following panelists: Session II Panelists: - Arnold Langbo, Chairman of the Board, Kellogg Company - Gloria Rodriguez, Founder, National President & CEO, AVANCE Inc. - Sheila Amaning, Parent - Police Chief Melvin Wearing (New Haven, CT) - Harriet Meyer, Exec. Director, The Ounce of Prevention Fund - Rob Reiner, Chair & Founder, "I Am Your Child Campaign" - Governor Bob Miller, (NV), Chair of the NGA Note: The Principals will have follow-up questions between each panelist.
4:15 p.m.-4:30 p.m.	**The President** makes closing remarks.
4:30 p.m.	**The Four Principals** depart.

4:00 p.m. East Visitors Gate opens for guest arrival. Guests hold in the East Garden/Colonnade (rain) before proceeding to the South Lawn. (Invitation time is 4:30 p.m.) (Refer to task sheet.)

4:30 p.m. **The President and the First Lady** proceed to the Residence until time for the reception.

4:30 p.m. Conference participants depart the East Room for the South Lawn via staircase to Diplomatic Reception Room.

4:30 p.m.-6:30 p.m. **RECEPTION ON THE SOUTH LAWN**
Approx. 400 guests
Closed Press

5:30 p.m.-5:45 p.m. The First Lady arrives in the Diplomatic Reception Room for announcement onto the South Lawn.

Program:
- The First Lady makes remarks and departs..

6:30 p.m. Guests depart the South Lawn via the East Gate.

INFO PACKET DISTRIBUTION NOTE: Guests (including conference participants) will receive an information packet in the East Colonnade as they depart the reception.
Contact: Robyn Dickey, Christa Robinson

CONFERENCE SESSION NOTE - OEOB 450 ELEMENT

Contact: Ann Eder

Approx. 150 guests will watch Session I in the OEOB Rm 450 via Satellite. They will not participate in Session II, but will return for the Reception.

REGIONAL SATELLITE SITES

Contact: Kris Balderston

There will be approx. 82 locations watching Session I via satellite. Session II will not be shown via satellite. The Regional sites will have their own Session II.

East Room Manifest

John Podesta
Melanne Verveer
Bruce Reed
Ann Lewis
Elaine Kamarck
Elena Kagan
Nancy Hoit

The following people do not need seats if space is a problem:
Jennifer Klein
Nicole Rabner
Pauline Abernathy
Christa Robinson
Ellen Lovell
Lucy Hackney
Katy Button
Amy Greenspun (with Mrs. Gore)
Carolyn Curiel
David Shipley

The following people will not stay but need access to the East Room:
Emily Bromberg
Ann Catalini
Stacy Rubin

I did not include press office people. I assume you know who they are.

Afternoon Session:
Susan Liss

#1, 5F

SEQUENCE FOR FIRST PANEL

- Participants are announced into the East Room and take seats at table.
- The President and the First Lady are announced into the room and proceed to the podium.
- The First Lady makes welcoming remarks from the podium and introduces the President.
- The President makes remarks.
- The President and the First Lady then take their seats at the table.
- The President calls on the first speaker, David Hamburg to open the discussion.
- David Hamburg makes remarks and introduces the next three consecutive speakers.
- Dr. Donald J. Cohen makes remarks.
- Dr. Carla J. Shatz makes remarks.
- Dr. Patrickia K. Kuhl makes remarks.
- The President will thank first three speakers and call on the next three speakers to discuss the implications of the information being discussed, beginning with Ezra Davidson.
- Ezra Davidson will make remarks.
- The President will ask Ezra Davidson a follow-up question.
- Dr. Berry Brazelton will make remarks.
- The First Lady will ask Dr. Berry Brazelton a follow-up question.
- Dr. Deborah Phillips will make remarks.
- The President will ask a follow-up question
- At this point, the First Lady and the President can pose one or two additional questions to any of the panelists.
- The President will thank participants and close event.

SEQUENCE FOR SECOND PANEL

(All speakers are SEATED while speaking)

- The panelists are announced into the East Room and take their seats.
- The President, the First Lady,the Vice President, and Mrs. Gore are introduced into room and take their seats.
- Mrs. Gore makes welcoming remarks from her seat and introduces the Vice President.
- The Vice President makes remarks and introduces the First Lady to moderate the discussion.
- The First Lady introduces all the panel participants and calls on them individually to speak, beginning with Mr. Arnold Langbo.
- Mr. Arnold Langbo makes remarks.
    - The President asks Mr. Langbo a follow-up question.
- Dr. Gloria Rodriquez makes remarks.
    - The Vice President asks Dr. Gloria Rodriguez a follow-up question.
- Sheila Amaning makes remarks.
    The First Lady asks Sheila Amaning a question.
- Police Chief Melvin Wearing makes remarks.
    - The President asks a follow up question to Police Chief Wearing.
- Harriet Meyer makes remarks.
    - The President asks a follow-up question to Harriet Meyer
- Rob Reiner makes remarks.
    - The President asks a follow-up question to Rob Reiner.
- Governor Miller makes remarks.

- POTUS thanks Gov. miller + other participants + makes closing remarks

- POTUS, FLOTUS, VP + MEG depart

FROM DEPTS

✓ · Debbie - sending kits, q and a, 1 pager on kits

✓ · Jeanne L. - 1 pager on health announcement, endorsement letter, Kaiser ? Q & A ?

Jennifer L. Klein
04/14/97 01:13:59 PM

Record Type: Record

To: Pauline M. Abernathy/OPD/EOP, Nicole R. Rabner/WHO/EOP

cc:

Subject: Our To Do List

As far as I can tell, this is what we need to do over the next few days:

✓ Nail down remaining panelist for panel 2 WHEN: today
WHO: Pauline

✓ Nail down policy announcements
WHEN: today
WHO: Nicole (DoD), Pauline (Prescription, DoJ, Head Start), Jen (Kits, Health Care)

- Write scripts for panel discussions
  WHEN: to Elena by mid-day tomorrow
  WHO: Nicole and Pauline - Jen to review
- Accomplishments Document
  WHEN: today
  WHO: Jen - Nicole and Pauline to review before giving to Elena tomorrow a.m.
- Questions and Answers
  WHEN: Feed to Jen today and tomorrow (Nicole - I'll do the ones raised during the briefing this morning) - to Elena by end of day tomorrow
  WHO: Jen
- One pagers on policy announcements
  WHEN: Wednesday morning to Elena
  WHO: DoD (Nicole), DoJ (Pauline), Prescription for Reading (Pauline) and Health Care (Jen) - Jen to review

✓ One pager listing all policy announcements
WHEN: Wednesday morning to Elena
WHO: Nicole and Pauline to get bullets to Jen by Tuesday p.m. - Jen to write document - start w/ accomplishments

✓ One pager on quotations from experts
WHEN: Wednesday p.m.
WHO: Nicole

Now take a deep breath! Am I missing anything?

- List of panelists for press (Nicole)
- List of participants for press (Kim Widdess)
- Event Memo (~~Nicole~~ Chrysa)

✓ · Revise one pager on conference (Jen)

Christa Robinson
04/14/97 03:28:29 PM

Record Type: Record

To: Pauline M. Abernathy/OPD/EOP, Nicole R. Rabner/WHO/EOP, Jennifer L. Klein/OPD/EOP

cc: Elena Kagan/OPD/EOP
Subject: Materials for Early Learning Conference

Is it possible for me to get drafts of the documents you all are producing by COB today or first thing tomorrow. I would like to be able to tell the press office and Staff Secretary that I will show them a complete draft package by tomorrow morning. Just to recap, these are the items:

- Agenda (Nicole)
- Fact Sheet on Policy Announcements (Pauline)
- Executive Order (Pauline)
- Adminstration Accomplishments (Jen)
- Biographical information on each panelist (Pauline/Nicole)
- 1 Page of relevant Facts (Nicole)
- 1 Page of relevant quotes (Nicole)
- Internal Q&A (Jennifer)
- Event Memo (Christa)
- Script w/ brief bios (Christa)

I am working on getting the following additional items from others:
- Participant List (Kim)
- Satellite Sites (Kris)
- O-3 Poll
- Family Parenting Kits
- Rethinking the Brain Report
- Starting Points
- Newsweek

Christa Robinson
04/09/97 07:26:36 PM

Record Type: Record

To: Phillip Caplan/WHO/EOP, Elena Kagan/OPD/EOP

cc: Pauline M. Abernathy/OPD/EOP, Jennifer L. Klein/OPD/EOP, Nicole R. Rabner/WHO/EOP
Subject: Background Material for Early Learning Conference

We will be preparing the following materials for the President's briefing book:
- Event Memo (which will include information on policy announcements)
- Script - 1 Page list of panelists in speaking order with short bio information.
  *There will be two scripts - one for each panel.
- Accomplishments Document - 1 page
- New "0-3" Poll.
- Family Parenting Kit (which will be distributed to all attendees).

Handouts to audience: (let me know if you would like any of these for the President's briefing book.)
- List of all attendees and affiliations, including audience.
- Agenda for the full Conference.
- 1 Pager on Administration Accomplishments (also for POTUS)
- 1 Pager on Policy Announcements (incorporated in POTUS briefing).
- 1 Pager of relevant facts
- 1 Pager of relevant quotations from experts.
- 1 Pager of Satellite Sites (incorporated in POTUS briefing)
- Family Parenting Kit

In addition, internal Q&A will be provided for the Press office.

6:25pm - 6:45pm

Christa Robinson
04/09/97 07:26:36 PM

Record Type: Record

To: Phillip Caplan/WHO/EOP, Elena Kagan/OPD/EOP

cc: Pauline M. Abernathy/OPD/EOP, Jennifer L. Klein/OPD/EOP, Nicole R. Rabner/WHO/EOP
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- 1 Pager on Policy Announcements (incorporated in POTUS briefing).
- 1 Pager of relevant facts
- 1 Pager of relevant quotations from experts.
- 1 Pager of Satellite Sites (incorporated in POTUS briefing)
- Family Parenting Kit

In addition, internal Q&A will be provided for the Press office.

6:25pm - 6:45pm

Pauline M. Abernathy

04/09/97 11:35:47 PM

Record Type: Record

To: Christa Robinson/OPD/EOP

cc: Nicole R. Rabner/WHO/EOP, Jennifer L. Klein/OPD/EOP
Subject: Re: Background Material for Early Learning Conference

For the packet and POTUS I think we should do more than one-page of accomplishments; perhaps three pages for POTUS, and we have even talked about longer for the packet.

I would have a paragraph on each of the panelists in the packet as well.

We will almost certainly have more than one page on policy announcements (eg one page as an overview and then 1 page on just DOD. Perhaps also a copy of the EO to DOD which I think likely). Depends on what we have in the end.

Deborah_Fine @ ed.gov
04/14/97 12:01:00 PM

Record Type: Record

To: Jennifer L. Klein

cc:
Subject: kits

hey:

1. i am the one who will need to do these q/a and overview so i will do it as fast as i can and get something to you. can't start on it until later today because of all the other things due today as well...

on the one pager that would go out to press... i need for carol and someone else here to review, so that would get to you tomorrow morning.

2. 500 kits are being delivered to christa by tomorrow. if you need something sooner, i can try to use the interoffice system. let me know.

3. how's hair? new color?

thanks.